MFT-4 R (02-00, R-3)

Application Required by NJ Motor Fuel Tax Law

Make any necessary changes below for 1 - 5

1. FID#

STATE OF NEW JERSEY Division of Taxation MOTOR FUEL TAX PO Box 189 Trenton, NJ 08695-0189

USE FOR RENEWAL ONLY

Soc. Sec. # of owner

APPLICATION FOR RENEWAL OF AN IMPORTER'S LICENSE

Application is hereby made by the undersigned for renewal of a Gasoline Importer's License to operate in the State of New Jersey in compliance with Chapter 39 of Title 54, Taxation, of the Revised Statutes and the Acts amendatory thereof and supplemental thereto. Every Importer's License is subject to the filing of a bond in such form and amount as provided by law. This license is also subject to payment of a renewal fee of \$450.00 for a three year period. Please return this application and a check or money order made payable to: State of New Jersey-MFT, on or before April 1.

OR

| 2. Name(If INCORE | PORATED - give Corp. Name; IF NO | OT - give Last Name | , First Name | , MI of | owner | (s)) | | | | | |
|--|---|---------------------|--------------|------------|--------|-----------|---------|-------|--------|--------|-----------|
| 3. Trade Name | Trade Name 5. Mailing Name and Address - (if different from farm address) | | | | | | | | | | |
| 4. Business Location: | Name | | | | | | | | | | |
| Street | | Street | | | | | | | | | |
| City | State | City | | | | | | | State | , | |
| Zip Code - | | Zip Code | | | | — | | T | | |] |
| (Give 9-digit Zip) | | | | | (Giv | e 9-digit | Zip) | | | | _ |
| Please fill in all information below: | | | | | | | | | | | |
| 6. Type of ownership (check one): | | | | | | | | | | | |
| ☐ NJ Corporation ☐ Sole Proprie | etor Partnership | □ Out- | of-State C | Corpoi | ration | l | | Lim | ited l | Partne | rship |
| ☐ Other - explain | | | | | | | | | | | |
| 7. Telephone Numbers: Contact Person | | | Ti | itle | | | | | | | |
| | | | | | | | | | | | |
| Daytime: () | Ext | Evening: (|) | | | | | | _Ext_ | | |
| | | _ | | | | | | | _ | | |
| 8. Provide the following information for ALL ow NAME | | corporate office | ers. (If mo | ore sp | ace is | | d, atta | | _ | | % |
| 8. Provide the following information for ALL ow | vners, partners or responsible | corporate office | ers. (If mo | ore sp | ace is | neede | d, atta | | _ | | |
| 8. Provide the following information for ALL ow NAME | vners, partners or responsible SOCIAL SECURITY N | corporate office | ers. (If mo | HOM (St | ACE is | DDRES | d, atta | ach 1 | rider) | C | % |
| 8. Provide the following information for ALL ow NAME | SOCIAL SECURITY NO TITLE | corporate office | ers. (If mo | HOM (St | ACE is | DDRES | d, atta | ach 1 | rider) | C | % |
| 8. Provide the following information for ALL ow NAME | SOCIAL SECURITY NO TITLE | corporate office | ers. (If mo | HOM (St | AE A | DDRES | d, atta | ach 1 | rider) | . C | %)WNE |
| 8. Provide the following information for ALL ow NAME | SOCIAL SECURITY NO TITLE | corporate office | ers. (If mo | HOM (St | AE A | DDRES | d, atta | ach 1 | rider) | . C | %)WNE |
| 8. Provide the following information for ALL ow NAME | SOCIAL SECURITY NO TITLE | corporate office | ers. (If mo | HOM (St | ACE IS | needer | d, atta | ach i | rider) | . C | % WNE |

| 11. Attach one copy each of CERTHERD FINANCIAL, STATEMENTS for the last two fiscal years. 22. List all suppliers of motor fuel. A copy of the contract from each supplier must be attached indicating type of product and where provided by supplicated a licensed distribute, importer or exporter in another state or foreign country? Please indicate state, license number, and point of continues that in each state (include name and telephone number). Additionally, please attach a copy of each license. If applicant is a foreign importer, include co of US Customs permit. 14. Does applicant hold a Federal Form 637? Is so, identify the issuing IRS District Office, provide copy of 637 certificate and copies of applicant's 1 to operately Porm270 reports liced with the IRS. 15. Does applicant hold any other New Jersey Motor Fuel License? If yes, explain 16. Has applicant or any related party ever had a Motor Fuel License denied, suspended, cancelled or revoked in New Jersey or any other jurisdiction if yes, explain 16. Does applicant have any outstanding liability or litigation? If yes, explain 17. Does upplicant have any outstanding liability or litigation? If yes, explain 18. Indicate below the maximum number of gallons of motor fuels that you expect to import into this state and the maximum number of gallons of motor fuels that you expect to purchase within this state in any month. 18. INFORTS 20. All PURCHASES 30. All PURCHASES 30. TOTAL HANDLE 31. Gold. NOTE: An *exchange* or *hook transfer* of gasoline in this State is a purchase and/or sale and must be reported by seller and purchaser. Referen N.J.S.A. 54:39.7. 19. Describe in detail applicant's planned activity and need for this license. 10. Inducte below by which type of carrier you expect to receive/import motor fuels into this State: 11. Tanker 12. Placine (greater) place of the product copy of uprecement) are less than the company of the product and who has full ownership, possession, castody, cont and direction of the feel while in transit into th | | | | | |
|--|-------|---|---|--|--|
| in each state (include name and telephone number). Additionally, please attach a copy of each license. If applicant is a foreign importer, include or of US Customs permit. 14. Does applicant hold a Federal Form 637? Is so, identify the issuing IRS District Office, provide copy of 637 certificate and copies of applicant's two quarterly Form220 reports filed with the IRS. 15. Does applicant hold any other New Jersey Motor Fuel License? If yes, explain | 12. | List all suppliers of motor fuel. A copy of the contract from | each supplier must b | e attached indicating type of | |
| too quarterly Form?20 reports filed with the IRS. 15. Does applicant hold any other New Jersey Motor Fuel License entired, suspended, cancelled or revoked in New Jersey or any other jurisdiction if yes, explain | | in each state (include name and telephone number). Addition | nally, please attach a | copy of each license. If appl | icant is a foreign importer, include cop |
| 15. Does applicant hold any other New Jersey Motor Fuel License et al. (2014) 16. Has applicant or any related party ever had a Motor Fuel License denied, suspended, cancelled or revoked in New Jersey or any other jurisdiction for yes, explain 17. Does applicant have any outstanding liability or litigation? If yes, explain 18. Indicate below the maximum number of gallons of motor fuels that you expect to import into this state and the maximum number of gallons of mot fuel you expect to purchase within this state in any month. 18. Indicate below the maximum number of gallons of motor fuels that you expect to import into this state and the maximum number of gallons of motor fuels that you expect to purchase within this state in any month. 18. Indicate below the maximum number of gallons of motor fuels that you expect to purchase within this state in any month. 18. Indicate below transfer? of gasoline in this State is a purchase and/or sale and must be reported by seller and purchaser. Referen N.1.5. A. 54:39-7. 19. Describe in detail applicant's planned activity and need for this license. 20. Indicate below by which type of carrier you expect to receive/import motor fuels into this State. 1 Tank Car | | | | | |
| 17. Does applicant have any outstanding liability or litigation? If yes, explain | | | | | |
| Indicate below the maximum number of gallons of motor fuels that you expect to import into this state and the maximum number of gallons of mothely you expect to purchase within this state in any month. IMPORTS Gal. NJ PURCHASES Gal. TOTAL HANDLE Gal. NOTE: An "exchange" or "book transfer" of gasoline in this State is a purchase and/or sale and must be reported by seller and purchaser. Referen N.J.S.A. 54:39-7. INJ.S.A. 54:39-7. Indicate below by which type of carrier you expect to receive/import motor fuels into this State. I maker Pipeline (provide copy of agreement) Barge Tank Car Tank Truck List below each manufacturing.plant, wholesale plant (include any leased storage) and retail station operated. Designate each by using "M" manufacturing. "W" for wholesale, "R" for retail, and "L" for leased. (If more space is needed, attach rider) Location Glass Number Total Capacity Gallons Location Grass Revenue of Tank Car Tank Truck Class Number Total Capacity Gallons Location Grass Revenue of Tank Car Gallons Location Grass Revenue of Tank Car Gallons Location Grass Revenue of Tank Car Gallons Total Capacity Gallons Class Number Total Capacity Gallons Location Grass Revenue of Tank Car Gallons Location Grass Revenue of Tank Car Gallons Location Grass Revenue of Tank Car Gallons Location Grass Revenue of Tank Gallons All information submitted will assist the office of the application is true and accurate in eva particular. Name of Applicant Singons qualify as defined above? Gallons Gallons The Information submitted will assist this office in the processing of your request. The Division of Taxation reserves the right to conduct a thorough investigation prior to renewing this license. Return completed application and \$450 fee to: MOTOR FUEL TAX, PO Box 189, Trenton, NJ 08695-0189 FOR DIVISION USE ONLY Investigation Initiated | | If yes, explain | | | |
| fuel you expect to purchase within this state in any month. IMPORTS | 17. | Does applicant have any outstanding liability or litigation? | If yes, explain | | |
| 20. Indicate below by which type of carrier you expect to receive/import motor fuels into this State. Tanker Pipeline (provide copy of agreement) Barge Tank Car Tank Truck | | fuel you expect to purchase within this state in any month. IMPORTS Gal. NJ PURCHAS | ES | Gal. TOTAL HAN | DLE Gal. |
| Tanker | 19. | | this license. | | |
| 21. List below each manufacturing.plant, wholesale plant (include any leased storage) and retail station operated. Designate each by using "M" manufacturing, "W" for wholesale, "R" for retail, and "L" for leased. (If more space is needed, attach rider) Class | | | _ | | 1 Tank Truck |
| 22. Qualification for an importer license may be predicated upon applicant meeting the test of an importer. An importer is a person who brings gasoli into this state in his own vehicles, or who hires a common carrier to transport the product, and who has full ownership, possession, custody, cont and direction of the fuel while in transit into this State. Title to gasoline cannot change while in transit in a pipeline. a. Will applicant's imports qualify as defined above? | 21. | List below each manufacturing, plant, wholesale plant (incl | lude any leased stora | age) and retail station opera | ted. Designate each by using "M" f |
| into this state in his own vehicles, or who hires a common carrier to transport the product, and who has full ownership, possession, custody, cont and direction of the fuel while in transit into this State. Title to gasoline cannot change while in transit in a pipeline. a. Will applicant's imports qualify as defined above? | | Location | | | Total Capacity Gallons |
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| All information must be provided before the application can be processed. The information submitted will assist this office in the processing of your request. The Division of Taxation reserves the right to conduct a thorough investigation prior to renewing this license. Return completed application and \$450 fee to: MOTOR FUEL TAX, PO Box 189, Trenton, NJ 08695-0189 FOR DIVISION USE ONLY License No Investigation Initiated | | Name of Applicant | | Signature of Owner | Partner or Officer |
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